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# Sunlight and Melanin Pigmentation\*

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Madhu A. Pathak, Kowichi Jimbow, George Szabo, and Thomas B Fitzpatrick

Department of Dermatology. Harvard Medical School, Massachusetts General Hospital, Boston, Massachusetts 02114

1	Intro	duction	211
2.		titutive Melanin Pigmentation	212
	2.1	Biology of Melanin Pigmentation	212
	2.1	2.1.1. Formation of Pigment Granules	213
		2.1.2. Melanization of Melanosomes	214
		2.1.3. Transfer and Dispersion of Melanosomes	215
	2.2.	Normal Skin Color and Human Racial Color Differences	216
3.		Itative Melanin Pigmentation: Action of Light	219
٥.	3.1.	Immediate Tanning Reaction	219
	J. 1.	3 1 1 Photooxidation of Preformed Melanin	221
		3.1.2. Changes in the Distribution Pattern of Melanosomes in the Epidermis	222
		3.1.3. Changes in the Distribution Pattern of 10-nm Melanocytic Filaments	224
	3 2.	Delayed Tanning Reaction and Hyperpigmentation of the Skin	225
	3 3	Action Spectrum for Melanogenesis	231
	3.4	Effect of Single and Multiple Exposures of UV Radiation on Human	
	3.4	Melanocytes	233
4.	Dhot	oprotective Role of Melanin	234
<b>→.</b> 5		rences	236
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# INTRODUCTION

When viewed from the perspective of photobiology, melanin pigmentation of human skin can be described in two categories: the first, constitutive or intrinsic skin color, and the second, facultative or inducible skin color (Quevedo et al., 1974). Constitutive skin color designates the genetically determined levels of cutaneous melanin pigmentation in accordance with the

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contains tyrosinase and (or) filaments that have a distinct 10-nm (100-Å) periodicity. The formation of melanosomes in this initial stage of development is regulated by the Golgi apparatus, the Golgi-associated endoplasmic eticulum, and rough endoplasmic reticulum. A stage I melanosome is believed to contain tyrosinase, structural proteins, membranes, and possibly certain auxiliary enzymes. It is speculated that polypeptides of the enzyme yrosinase are synthesized on ribosomes and that the phospholipid-containing proteins are fashioned into membranes by the Golgi complex.

Stage II describes an oval organelle in which numerous membranous structures become evident, with or without cross-linking, and show a distinct 10-nm periodicity.

Stage III reflects an oval organelle in which melanin synthesis has begun through the enzymatic oxidation of tyrosine. Melanin accumulation occurs on the inner membrane, and the 10-nm periodicity evident earlier in stage II becomes partially obscured.

Stage IV reflects the end stage of development of melanosomes in which the deposition of melanin has resulted in the obliteration of the nternal structure of melanosomes in stages II and III. The organelle is electron opaque and shows electron-lucent bodies at its periphery (Jimbow and Fitzpatrick, 1974a).

#### 2.1.2. Melanization of Melanosomes

Melanin synthesis takes place within the melanosomes (Seiji et al., 1963a,b; Fitzpatrick et al., 1967; Moyer, 1966). The copper-containing enzyme tyrosinase; present in these organelles, catalyzes the oxidation of both monohydric (tyrosine) and dihydric phenols (3,4-dihydroxyphenylalanine) to orthoquinones. Molecular oxygen acts directly as the hydrogen acceptor in the reactions catalyzed by tyrosinase. In contrast to melanins of plant origin, which are generally described as catechol melanin in type, the mammalian melanins are indole in type and are composed basically of indole-5,6-quinone units. According to the classic Raper-Mason scheme of enzymic melanin formation from tyrosine and 3,4-dihydroxyphenylalanine (dopa) critically reviewed by Mason (1967), melanin is thought to be formed from tyrosine → dopa → dopa-quinone → dopa-chrome → 5,6dihydroxyindole → indole-5,6-quinone → melanin through the polymerization of indole-5,6-quinone units (a homopolymer of indole-5,6-quinone linked through a single bond type). However, several chemical studies of natural melanins (Nicolaus, 1968; Swan, 1963, 1964; Robson and Swan, 1966; Hempel, 1966) using <sup>3</sup>H-labeled and <sup>14</sup>C-labeled precursors have revealed that mammalian melanins are not composed entirely of indole-5,6quinone units, but are complex polymers (a heteropolymer or a random polymer) consisting of several different monomers that may be coupled by various bond types of dopa-quinone, dopa-chrome, 5,6-dihydroxyindole, and 5,6-dihydroxyindole-2-carboxylic acid at various oxidation levels held together by a variety of bond types. Pyrrole units, carrying carboxyl groups. in addition to phenolic or quinonoid groups or both, are also present, and some of them represent carboxylated terminal units. The redox state of melanin polymer is equally important. The polyquinonoid melanin can have oxidized (quinonoid), as well as reduced (phenolic) forms of indole-5.6quinone. These remarks relate only to the synthesis of the black-brown melanin (eumelanin) and much less is known about the yellow and red pigments in mammals (phaeomelanins) which differ from eumelanin. Eumelanin is insoluble in almost all solvents and is resistant to chemical treatments, whereas pheomelanin is soluble in dilute alkali (Duchon et al., 1968; Fitzpatrick et al., 1971a,b). It is believed that dopa-quinone formed from the oxidation of tyrosine by tyrosinase interacts with the sulfur-containing amino acid, cysteine, to form cysteinyldopa from which phaeomelanin is derived by pathways yet incompletely understood (Fitzpatrick et al., 1971b. Quevedo et al., 1974).

### 2.1.3. Transfer and Dispersion of Melanosomes

We have discussed the fact that the epidermal melanocytes are in symbiotic relationship with the epidermal keratinocytes. The importance of this symbiotic relationship can be well recognized when one examines the distribution of melanosomes after their transfer into keratinocytes in various races (Mottaz and Zelickson, 1967; Klaus, 1969). Electron microscopic observations of human epidermis obtained from people of various racial backgrounds have revealed that melanosomes occur within keratinocytes as discrete granules (nonaggregated form) or as aggregates of two or more discrete granules within membrane-limited bodies (Hori et al., 1968; Szabo et al., 1969; Toda et al., 1972; Wolff and Konrad, 1971; Olson et al., 1973). In Caucasoids and Mongoloids, the melanosomes are almost always found in groups (Fig. 1) and resemble the membrane-limited vacuoles that have been identified as phagolysosomes (Mishima, 1967a,b; Hori et al., 1968). In the melanosome complexes of fair-skinned Caucasoids, the melanosomes are loosely packed and there is some granular substance located between them. In Mongoloids and Orientals, the groups of melanosomes are usually very tightly packed, with little or no substance between the melanosomes. After UV irradiation, the keratinocytes of Mongoloids and Caucasoids usually still contain melanosome complexes

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(Szabo et al., 1969). However, the number of groups increases, and there is a tendency toward increased numbers of melanosomes inside the melanosome complexes. The keratinocytes of Negroids (African and American) and Australoids (Szabo et al., 1969; Mitchell, 1968; Toda et al., 1972) contain mostly single melanosomes, and only occasionally does one find groups and doublets of melanosomes inside keratinocytes (Fig. 1). This aggregation or nonaggregation of melanosomes in keratinocytes appears to be a size-dependent phenomenon (Toda et al., 1972; Wolff and Konrad, 1971) inasmuch as ellipsoidal melanosomes smaller than  $0.6 \times 0.3$  nm in size are usually arranged in groups of two or more and show evidence of degradation. Unlike those of Caucasoids and Mongoloids, the melanosomes of Negroids and Australian aborigines are larger  $(0.7-0.8 \times 0.3-0.4 \text{ nm})$ , and they usually do not form such aggregated complexes within the keratinocytes but are found as single, discrete bodies (Toda et al., 1972; Olson et al., 1973; Wolff and Konrad, 1971; Wolff et al., 1974). Thus, variations in the size of melanosomes and the distribution pattern of melanosomes in the keratinocytes significantly influence the color of the skin. When melanosomes are aggregated and are few in number and small in size, they will contribute less to the scattering and absorption of impinging light than when they are singly dispersed, greater in number, and large in size (Table 1).

#### 2.2. Normal Skin Color and Human Racial Color Differences

The most obvious difference between the various human races is the variation in the color of the skin. The factors that determine the skin color of normal skin include: (a) a reflection coefficient of skin surface; (b) absorption coefficient of epidermal-cell and dermal-cell constituents; (c) scattering coefficients of various cell layers; (d) thickness of the individual cell layers (stratum corneum, epidermis, and dermis); (e) the concentration of UV light and visible light absorbing components such as proteins (keratin, elastin, collagen, lipoprotein), melanin, nucleic acid, urocanic acid, carotenoids, hemoglobin (reduced and oxidized), and lipids; (f) the number and spatial arrangement of melanosomes and melanocytes; (g) the number and spatial arrangement of blood vessels and the relative quantity of blood cells (reduced and oxidized hemoglobin) flowing through the vessels. Pigmentation of the skin, as viewed clinically, is principally related to the variation in the content of melanin in the epidermis. If melanin pigment were absent from the skin, as in Vitiligo, the color of skin in all races would appear to be milk-white.

It appears therefore, that the color of skin is determined by the func-

Habitually .⊑ and Distribution Pattern of Melanosomes Color and Relationship between Constitutive Skin TABLE 1.

		TO BOOK			· · ·
Skin color	Size of melanosomes	Melanization of melanosomes	Tyrosinase activity in melanocytes	Distribution of melanosomes in george epidermal keratinocytes	Approximate number of melanosomes per basal keratinocyte
Heavily pigmented skin of African and American Negrous and Australian Aborigines	0.7-0.8 µm × 0.3-0.4 µm	Fully melanized, predominantly in stage 1V	Marked	Single, non- aggregated	#00# # 1 # 1 # 1 # 1 # 1 # 1 # 1 # 1 # 1 #
Moderately pigmented skin of Mongoloids (American Indians, Orientals)	0.5-0.7 μm × 0.2-0.4 μm	Moderately melunized stages III and IV	Moderate	Mixed, non- aggregated as well	250 ± 50
Moderately pigmented skin of Caucasoids (East Indians, Italians, Pkyptians)	0.5-0.7 μm × 0.2-0.4 μm	Moderately melanized stages III and IV	Moderate	Predominantly aggregated	9 H 000
Lightly pigmented skin of Caucasiods (fair-skinned Americans, British, French, Germans, etc.)	0.4-0.6 μm × 0.2-0.4 μm	Partially melanized stuges II and III	Weak	Predominantly aggregated	93 # 001

Based on random calculations of 50 koratinocytes of busal layer.

tional state of pigment-producing cells, the melanocytes. One of the most obvious questions to ask is how the function of melanocytes is related to phenotypical coloration, a coloration determined genetically (constitutive) or produced by environmental factors (facultative). On the macroscopical level one can qualitatively assign color grades (e.g., black, brown, olive, moderately fair, very fair, freckled, etc.) based upon the quantity of melanin in the epidermis. At the level of light microscopy, when skin biopsies are examined, one can also distinguish the variations in skin color by the presence of more or less melanin in the skin (Gates and Zimmerman, 1953). The color of human skin derives from the visual impact of the total melanin content of the epidermis and is influenced by the reflection, absorption, and scattering of the impinging radiation on the surface of the skin. But the racial origin or the background of an individual cannot be ascertained by the mere visual color of the skin based on its melanin content. A representative of the Mediterranean race or an Asiatic Caucasoid may be labeled as "white" during winter but as "colored" by the end of a sunny summer. It is also true that neither a numerical count of melanocytes nor any other histologic characteristic as seen by light microscopy in the paraffin-embedded skin sections could reveal the racial origin of the skin specimens. The epidermal melanocyte system of various human races has been investigated by Staricco and Pinkus (1957), Szabo (1954, 1959, 1967a,b), Mitchell (1963), and Toda et al., (1973). These investigators compared the melanocyte density of single representatives of various "colored" groups with the average melanocyte frequency of white Caucasians and observed that the colored races do not have more melanocytes than white Caucasians. Careful studies of human skin, particularly of the unexposed regions of the body, have revealed that racial differences in skin color are not due to differences in the number and distribution of melanocytes but are due to characteristic differences in the rate at which melanosomes are produced by melanocytes and transferred and distributed in keratinocytes (Fitzpatrick et al., 1965, 1971a,b; Toda et al., 1973; Pathak, 1967; Pathak et al., 1971; Quevedo et al., 1974).

Racial color differences can be recognized at the ultrastructural level and involve: (a) differences in the localization or distribution pattern of melanosomes in the keratinizing malpighian cells, either in the aggregated or in the nonaggregated form, or as a combination of aggregated and nonaggregated forms; (b) variation in the number of melanosomes in the epidermal melanocytes and keratinocytes; (c) differences in the size of melanosomes; (d) differences in the degree of melanization of melanosomes; and (e) differences in the degradation of melanosomes due to variations in the hydrolytic activity of these organelles. Variations in the hydrolytic activity of the melanosomes can influence the degradation of melanosomes. The

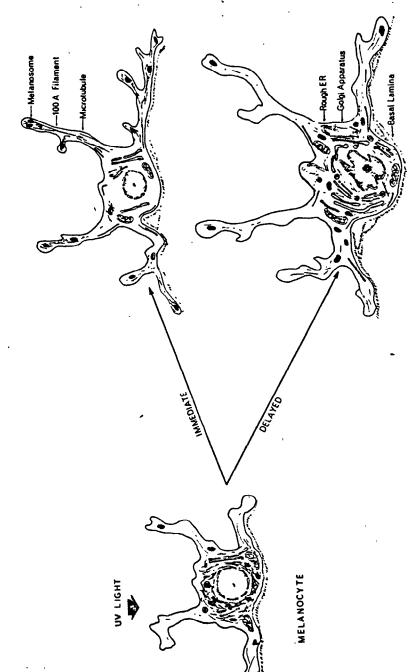
lighter skin color of Caucasoids may result from the degradation of mel nosomes, a phenomenon that has been observed to occur within ke atinocytes (Hori et al., 1968; Szabo et al.; Toda et al., 1974).

# FACULTATIVE MELANIN PIGMENTATION: ACTION OF LIGHT

Solar radiation profoundly influences skin color. Increased melan pigmentation which occurs after exposure of human skin to sunlight or UV light from artificial sources is familiarly known as "tanning." Tannir of the skin involves two distinct photobiologic processes: (1) immediate tar ning (IT), sometimes referred to as immediate pigment darkening (IPI reaction, and (2) delayed tanning (DT) (Fig. 2). The biophysica biochemical, and ultrastructural bases of these two processes will be re viewed briefly with special emphasis on the effects of single and multiple ex posures to UV radiation on (a) changes in the number of melanocytes (Figs 3, 4); (b) synthesis of melanosomes, i.e., the number of melanosomes and their size; (c) melanization of melanosomes; and (d) the transfer of mela nosomes to keratinocytes; concomitant changes in keratinocytes concerning (e) the number melanosomes transferred; and (f) the distribution pattern o melanosomes within the keratinocytes.

#### 3.1. Immediate Tanning Reaction

IT can best be seen in pigmented individuals or in the previously tan ned areas of fair-skinned individuals. IT can be induced both by long-wave UV (315-400 nm) and visible light (400-700 nm). UV-A (315-400-nm) radiation is more effective in the induction of IT than is visible radiation (Pathak, 1967; Pathak et al., 1962a,b; Pathak and Stratton, 1969; Jimbow and Fitzpatrick, 1975; Jimbow et al., 1974a,b, 1975a,b). UV-B radiation (290-315 nm), the sunburn-producing spectrum, does not stimulate IT as effectively as UV-A radiation. This selective induction of IT by UV-A is related to the depth of penetration and absorption of this radiation at the dermo-epidermal junction. The skin begins to be hyperpigmented with 5-10 min of midday summer sun exposure and can be maximally pigmented with 1 h of irradiation. When the skin is withdrawn from exposure to light, the hyperpigmentation fades rapidly within 30-60 min, and thereafter the color usually fades gradually, so that after 3-4 h the irradiated areas are barely hyperpigmented. Sometimes, however, after prolonged sun exposure, 90-120 min, skin may remain hyperpigmented for as long as 36-48 hr, after which time newly synthesized melanin (new melanogenesis or DT) begins to bu



nosomes, and dense aggregates of fine filamentous structures around the nucleus. Top right shows a melanocyte after induction of IT. Melanocytic thin 10-nm filaments are hardly seen in the perinuclear area; they can be seen in the dendritic processes. The melanosomes are closely intermingled with 10metanin pigmentation stimulated by sunlight are illustrated: immediate tanning (IT) and delayed tanning (DT) melanocyte from the unexposed skin. This melanocyte shows a round or oval nucleus, few melanized mela-

nm filaments. Lower right shows a hypertrophic melanocyte with well-developed dendrites after DT.

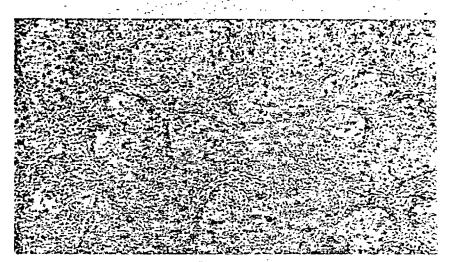


Fig. 3. A low-power view of dopa-incubated epidermal preparation from the unexpos Caucasoid skin. Biopsy was initially incubated in 2N NaBr, epidermis was then split from t dermis and reincubated in dopa solution (Starrico and Pinkus, 1957). The perikaryon of t melanocyte is small and the dopa reaction is weak.

perpigment the skin. The residual hyperpigmentation of IT is due to the redistribution of the existing melanosomes within the keratinocytes. I asmuch as the IT reaction is a rapid phenomenon and can be induced in matter of a few minutes, it appears that IT results from changes in melanosomes already existing in the melanocytes and keratinocytes of skin and brought about by a combination of several of the events described below.

#### 3.1.1. Photooxidation of Preformed Melanin

An immediate photooxidation of already existing melanin polymer of curs through the generation of semiquinonelike free radicals in melan (Pathak, 1967; Pathak and Stratton, 1968). As stated earlier, the indole-5, quinone units in the melanin polymer can exist in different stages of oxidition. The comparatively reduced state of melanin is evidenced by a brown or lightly tanned color of the skin, and the comparatively oxidized form cabe recognized as a dark brown or black color. One of the most importate properties of melanins is their stable, free radical character which is a cribed to the semiquinonoid form of 5,6-dihydroxyindole that is stabilized by resonance throughout the highly conjugated polymer. The free radic content depends upon the degree of melanization and oxidation (Mason al., 1960; Blois et al., 1964; Pathak, 1967; Stratton and Pathak, 1969 Pathak and Stratton, 1969). Prior to irradiation the lightly tanned ski

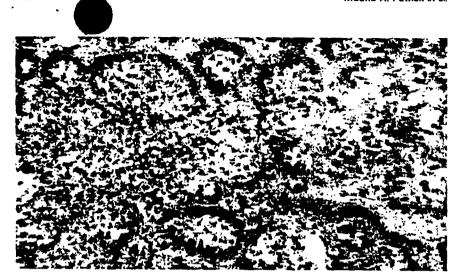


Fig. 4. A low-power view of dopa-incubated biopsy preparation at day 5 after exposure to UV radiation (150 mJ/cm<sup>2</sup>, 290-320 nm). The intensity of the dopa reaction is markedly increased, the perikaryon of the melanocyte is hypertrophic, and there is marked arborization of the dendritic process.

exhibits a weak electron paramagnetic resonance signal characteristic of melanin free radicals. Immediately after irradiation with UV and visible light, the color of the skin changes to dark brown or black and one can detect a significant increase in the semiquinonelike free radicals in the melanin polymer, suggesting that an immediate oxidation reaction is also occurring in the polymer. Furthermore, the unexposed skin of fair individuals contains melanosomes which are partially melanized and can be recognized in stages II and III of their development. After induction of IT, however, one can often detect melanosomes in stages III and IV (highly melanized form). The unexposed skin of darkly pigmented individuals (e.g., Mongoloids, Negroids, and pigmented Caucasoids) already contains melanosomes in stages III and IV. Their melanosomes are mostly in stage IV when the IT reaction is induced.

#### 3.1.2. Changes in the Distribution Pattern of Melanosomes in the Epidermis

In the melanocytes of unexposed skin, the melanosomes are usually aggregated around the nucleus and are rarely seen in the dendritic processes (Figs. 2, 5, 6). After the induction of IT, however, the melanosomes become prominent in the dendritic processes (Figs. 2, 7, 8; Jimbow et al., 1973, 1974a). There is also a definite change in the number and dispersion pattern

of melanosomes in keratinocytes after the IT reaction. A random count of melanosomes in keratinocytes with nuclei located in the basal layer of four subjects showed a statistically significant increase in the number of melanosomes per keratinocyte after the IT reaction. These findings suggest that during the IT reaction there was a rapid transfer and redistribution of pigmented melanosomes from the melanocytes to the keratinocytes. It is equally possible that this redistribution and variations in the melanosomal number discussed above reflect changes in the sol-gel property of the cytoplasm and also an increment in the negative charge of the melanosomes due to the absorption of radiant energy.

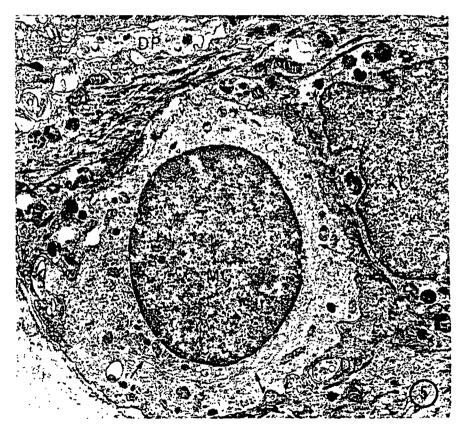


Fig. 5. An electron micrograph of unexposed skin of buttock from a Mongoloid subject. The melanosomes are mostly in melanizing stages (stages II and III). Dense aggregates of 10-nm filamentous structures (see arrows) around the oval nucleus can be seen. On the right side of the figure is a keratinocyte (KC); DP = dendritic processes, MC = melanocyte, (×10,200).

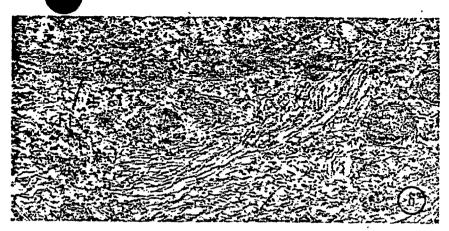


Fig. 6. A higher-power view of a portion of the melanocyte shown above. Around the nucleus, an aggregate of 10-nm filaments (F) and melanosomes in stages I-III can be seen. FL = fibrous lamina of the nucleus (N).

# 3.1.3. Changes in the Distribution Pattern of 10-nm Melanocytic Filaments

Recent observations of Jimbow and Fitzpatrick (1975a) and Jimbow et al. (1973, 1975a) have indicated that human melanocytes contain 10-nmdiameter filaments. These melanocytic filaments, and probably microtubules also, play a prominent role in the IT reaction and provide a motive force for rapid movement and transfer of melanosomes from melanocytes into the keratinocytes (Figs. 2-8). This hypothesis is based on the following observations. Prior to the induction of IT, the melanocytes from the habitually nonexposed regions of the body in the skin of Caucasoids, Mongoloids, and Negroids exhibit: (a) few melanosomes, (b) numerous 10-nm-diameter filaments, and (c) a few microtubules (25-27 nm in diameter) characteristically aggregated around the nuclei. Per contra, significant changes in the distribution pattern of these organelles in IT involved (a) prominence of dendritic processes laden with 10-nm-diameter filaments; (b) translocation of melanosomes from the perikaryon to dendritic processes which forms a concourse of melanosomes in the bundles and a meshwork of microfilaments; (c) a few microtubules in the extended processes of dendrites; and (d) a concomitant increase in the number of melanosomes in the keratinocytes (Jimbow and Fitzpatrick, 1975; Jimbow et al., 1973, 1975a).

Thus, IT reflects changes in the existing melanosomes and does not involve the new synthesis of melanosomes. The most noticeable changes include (a) photooxidation of melanin, (b) marked change in the distribution pattern of melanocytic filaments and microtubules as well as melanosomes characterized by shifting and dispersion of these filaments and tubules from the perinuclear area to the dendritic processes of melanocytes, and (c) a

Sunlight and Melanin Pigmentation

recognizable decrease in the number of melanosomes in the perikaryon companied by an increase in the number of melanosomes in the k atinocytes.

# 3.2. Delayed Tanning Reaction and Hyperpigmentation of the Skin

Delayed tanning is a process which involves the production, transfidistribution, and, to a limited extent, degradation of melanosomes (Jimbo et al., 1974a,b, 1975b). The degree of melanin pigmentation that occi following exposure of human skin to solar radiation varies to a certa

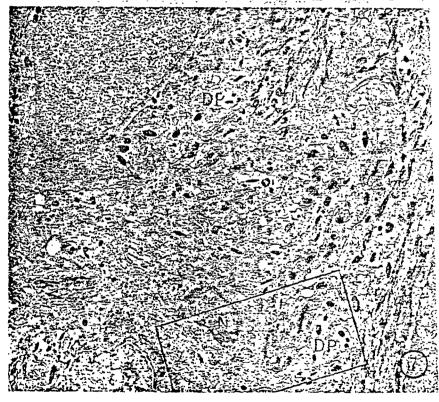


Fig. 7. A melanocyte from Mongoloid buttock skin after the IT reaction. The specimen was taken from the same subject shown in Figs. 5 and 6. The dendritic processes (DP) of the melanocytes are well developed and extend into the keratinocytes. The melanosomes become less aggregated in the perinuclear area (N = nucleus) and are now prominently seen in the dendritic process. The melanocyte contains more melanized melanosomes than those shown in Fig. 5 before exposure.



Fig. 8. High-power view of the portion of the melanocyte shown in a rectangular box in Fig. 7. The nucleus (N) is indented and shows nuclear pores. The 10-nm filaments appear to be stemming from perinuclear area to the tip of dendrites (see arrows). Microtubules (MT) are located in the periphery of the cytoplasm.

extent with the total dose of solar radiation received, but more importantly it is regulated by the genetically controlled functional capacity of the epidermal melanin unit of the individual. Genes control the structure of the melanosomes, the level of tyrosinase activity, the polymerization process of the indoleguinone and other intermediates, and the development of the dendrites that transfer the melanosomes to the keratinocytes. Solar radiation or UV radiation from artificial sources influences the genetically controlled normal melanin pigmentation (facultative color) of the skin in one or more of the following ways: (a) an increase in the number of functional melanocytes (dopa-positive) as a result of proliferation of melanocytes, and also possibly the activation of the dormant or resting melanocytes (Figs. 3, 4); (b) hypertrophy of the melanocytes and increased arborization (branching) of the dendrites of melanocytes; (c) augmentation of melanosome synthesis manifested by an increase in the number of melanosomes both in the melanocytes and in malpighian cells (keratinocytes) (Figs. 8, 9). The number of fully melanized melanosomes (stage IV) is increased both in the melanocytes and the associated pool of keratinocytes. Even the number of early and intermediate stage (partially melanized, stage I and II) melanosomes is increased; (d) an increase in tyrosinase activity due principally to the synthesis of new tyrosinase in the proliferating melanocytes; (e) an increase in the transfer of melanosomes from melanocytes to keratinocytes as the result of increased turnover of keratinocytes; (f) an increase in the size of melanosomes and also an increase in the size of the melanosome complex. This is, however, greatly dependent on the racial complexion and genetic background of the individual. These observations are illustrated in Figs. 9 and 10 and summarized in Table 2.

Pigmentary responses in individuals who are exposed to sun can be grouped into the following five categories:

I. (Easy burn and no tan): People who sunburn very easily and do not show visually recognizable evidence of tanning (e.g., very fair skin, red hair, blue eyes, freckled skin, people with Celtic background—Irish and Scottish).



Fig. 9. An electron micrograph of a melanocyte and a keratinocyte from an unexposed Caucasoid back skin prior to UV irradiation. On the left side of the figure one can see a melanocyte with few melanosomes in stages II and III of their development. Notice the perinuclear distribution of 10-nm filaments. The keratinocyte (right side) shows few melanosomes which are in aggregated or complex forms.

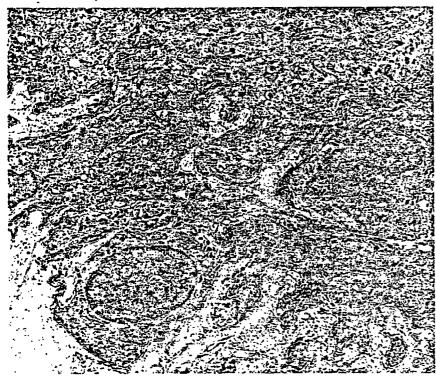


Fig. 10. An electron micrograph of a Caucasoid back skin during the delayed tanning (DT) reaction induced by UV-A radiation (315-400 nm). The specimen was taken from the same subject shown in Fig. 9. There are three melanocytes laden with numerous, highly melanized (stage IV) melanosomes. Note the increased number of transferred melanosomes in the keratinocytes. The melanosomes are either singly dispersed or are aggregated and forming complexes. Both UV-B (290-315 nm) and UV-A plus 8-MOP can induce similar changes (see Table 2).

- II (Easy burn and slight tan): People who sunburn easily and tan slightly (e.g., moderately fair skin, people with blond hair, bluegreen, or hazel eyes).
- III. (Burn and then tan): People who burn moderately in the beginning, acquire a tan readily, and then do not generally burn on subsequent sun exposures (e.g., "brunette skin," olive skin, medium color skin).

TABLE 2. Changes in Epidermal Melanin Unit in Delayed Tanning Reaction after Repeated Exposures to UV-B, UV-A, or UV-A plus Oral 8-Methoxypsoralen (8-MOP)

Nature of observations	Nonexposed skin	Exposed skin after UV-B UV-A, or UV-A plus oral 8-MOP
Macroscopic	19.00 (19.00 )	* * .
Degree of visual pigmentation	+ 	Increased with UV-B ++ UV-A +++, UV-A plu 8-MOP ++++;
Onset of visual pigmentation	Continuous at steady state	UV-A within 48 h UV-B within 72 h UV-A plus 8-MOP within 96-120 h
Degree of erythema reaction	None	Minimal with UV-A, moderate with UV-B, moswith UV-A plus S-MOP but minimal with UV-plus trimethylpsoralen.
Light microscopic		
Melanin granules	Barely visible in fair Caucasoids but easily visible in Negroids and Mongoloids	Increased in all races; mos with UV-A plus 8-MOP
Number of melanocytes	About 700-950/mm² in unexposed skin and 1000-1300/mm² in habitually exposed skin; no racial differences in population density	Increased 2-3 times within 7-10 days; most remark able increase in UV-plus 8-MOP
Perikaryon of melanocytes	Small	Markedly enlarged
Dendrites of melanocytes	Poorly developed	Prominent and marke arborization
Dopa reaction	Weak	Strong; UV-A plus 8-MO > UV-A; UV-A \geq UV-
Tyrosine reaction	Barely detectable or absent	Increased and easily de tectable in all races
Electron microscopic		

Nature of observations	Nonexposed skin	Exposed skin after UV-B, UV-A, or UV-A plus oral 8-MOP
Melanization of melanosomes	Predominantly un- melanized in fair-skin (stages I-III); melaniz- ing forms (stage III-IV) in dark skin	Melanized melanosomes (stages III and IV) markedly increased. In UV-A and UV-A plus 8-MOP most of the melanosomes are fully melanized; in UV-B melanosomes are in various stages of melanization
Size of melanosomes	Small (400-500 nm in long axis) Caucasoids; large in Negroids (500-700 nm in long axis)	Some increased; some are 700-800 nm even in Caucasoids
Distribution of melanosomes	Perinuclear and rarely in dendrites	Variable (diffused in peri- karyon and dendrites); more prominent in den- drites particularly with UV-A or UV-A plus 8-MOP
10-nm (100 Å) filaments	aggregation	Diffusely scattered in peri- karyon and dendrites
Golgi apparatus	Poorly developed	Well developed, marked in- crease in size and number
Rough endoplasmic reticulum	Poorly developed	Well developed
Microtubules  In keratinocytes:	Perinuclear	Perinuclear and in dendrites
Distribution pattern of melanosomes	Aggregated (melanosome complexes) in Caucasoids, nonaggregated in Negroids and Australoids, and mixed (aggregated and single) in Mongoloids.	Slightly altered (more single and aggregated melanosomes) in Cauca- soids and Mongoloids; in Negroids nonaggregated form
Ratio of nonaggregated versus aggregated form of melanosomes	Predominantly aggregated in Caucasoids; non- aggregated in Negroids	Increased ratio of nonag- gregated form, particu- larly with UV-A plus 8-MOP
Number of melanosomes per melanosome complex	5-6 melanosomes in Caucasoids	Fewer, 3-4 melanosomes in Caucasoids; most promi- nent decrease UV-A plus 8-MOP

TABLE 2. Continued.

Nature of observations	Nonexposed skin	Exposed skin after UV-B, UV-A, or UV-A plus oral 8-MOP
Autophagic vacuoles in melanocytes and keratinocytes	Absent or very rare	Usually seen in UV-B and UV-A plus 8-MOP treated skin
Lipid droplets	Absent or very rare	Usually seen in UV-B and UV-A plus 8-MOP treated skin

- IV. (No burn and good tan): People who do not burn readily but tan substantially; their eyes and hair are most likely dark (e.g., pigmented Caucasoids, Orientals, and others).
- V. (Never burn and markedly tan): Markedly pigmented people (African and American Negroes, Australian Aborigines) who generally never burn but get profusely dark skinned after sun exposure.

## 3.3. Action Spectrum for Melanogenesis

Wavelengths shorter than 320 nm, which cause sunburn (erythema), are considered to stimulate melanogenesis or delayed tanning most effectively (Blum, 1955, 1959). The action spectrum for sunburn induced by exposure to sunlight has a maximum at 300-307 nm; that for sunburn induced by UV radiation from artificial sources has a maximum at 250-254 nm (8-h response). The erythema effectiveness gradually decreases at 270-280 nm (a distinct trough is seen at 280 nm due to absorption by proteins of the stratum corneum) and shows a distinct rise at 290-293 nm. The erythema effectiveness subsequently decreases rapidly at 313-320 nm). Wavelengths longer than 320 nm are weakly erythemogenic (Pathak and Epstein, 1972; Ying et al., 1974). It requires nearly 800-1000 times more energy to produce a minimally perceptible erythema (20-30 J cm<sup>-2</sup>) at 320-400 nm than is required to produce a similar degree of erythema reaction at 290-300 nm (about 20-30 mJ cm<sup>-2</sup>). If the erythema reaction were directly related to melanogenesis, the findings discussed above would suggest that the maximum efficiency for melanogenesis should be at 250-254 nm, followed

by slightly less response at 290-315 nm, and long-wave UV and visible radiation would be least effective in the stimulation of melanogenesis. It is, in fact, quite the opposite. Germicidal radiation is significantly less melanogenic than UV-B (290-315 nm) or UV-A (315-400 nm) radiation. The pigmentation produced by 254 nm is less intense and of shorter duration than that produced by UV-B or UV-A radiation (Parrish et al., 1972). Several hundred multiples of the minimal erythema dose (MED) exposures of UV-C radiation ( $\lambda$  < 280 nm) will not produce any blistering reaction nor any intense pigmentation response, while as little as 3-6 times the MED exposure to 290-315-nm radiation may cause an intense erythema and pigmentation reaction. For example, an exposure to 254-nm radiation equivalent to 30 x MED will produce a maximum of grade 2+ pink erythema response and a minimal tan (grade +, light brown tan). On the other hand, an exposure to 297-nm radiation equivalent to 2-5 × MED will produce a grade 2+ pink erythema response and a moderate tan (grade -++, medium brown tan). An exposure dose of 10 × MED at 297 nm can produce a grade +++, deep brown tan. In recent studies (Ying et al., 1974; Jimbow et al., 1974a,b, 1975b; Willis et al., 1972), it was observed that UV-A (315-400 nm) was less erythemogenic and induced less intracellular degenerative change than UV-B. UV-A was found to be more effective in the induction of new melanogenesis than was UV-B. For a long time it has been generally believed, and more or less firmly stated in the dermatologic literature, that melanogenesis (DT) is optimally initiated by UV light of the so-called erythema spectrum (i.e., by UV-B). As early as 1962, Pathak et al., showed that irradiation of human skin with long-wave UV radiation (UV-A), and to a limited extent visible light, would not only stimulate IT but also new melanogenesis. Subsequent studies by Langner and Kligman (1972) and Willis et al., (1972) reemphasized the profound stimulation of melanin pigmentation by UV-A. In fact, UV-A appears to be more effective in the induction of new melanogenesis than UV-B radiation (Jimbow et al., 1974a,b, 1975b). Thus, the generally held concept of the initiation of melanogenesis only by UV-B should be modified; long-wave UV light (UV-A) must be included in the melanogenic spectrum. It must be stressed, however, that if one were to estimate the quantum, efficiency for melanogenesis by UV-B and UV-A, it would be apparent that UV-B is more efficient in the induction of melanogenesis than is UV-A. It requires approximately a minimum of 50-100 mJ cm<sup>-2</sup> to stimulate melanogenesis by UV-B, whereas a minimum of 10-12 J cm<sup>-2</sup> of UV-A is required to stimulate melanogenesis. It would appear, therefore, that the experimentally observed marked stimulation of melanogenesis by UV-A, both by Jimbow et al., (1974a,b, 1975b) and Languer and Kligman (1972), is due to the fact that the less energetic photons associated with UV-A radiation (about 70-

80 kCal mol<sup>-1</sup>) cause less cellular degeneration than does UV-B (about 95-100 kCal mol<sup>-1</sup>). Differences in the depth of transmission and absorption of UV-A and UV-B radiation within the epidermis are also important factors in the differential activation of the epidermal melanocytes. In fair-skinned individuals, most of the impinging UV-B radiation (about 75-80%) is absorbed by the nonviable multicellular layer of the stratum corneum. About 10-15% is absorbed by the viable cells of the malpighian layer (keratinocytes), and about 7-10% will transmit through the dermo-epidermal junction and be absorbed in the papillary dermis (Pathak and Epstein, 1971; Pathak and Fitzpatrick, 1974). It is the absorbed radiation at the dermoepidermal junction where the melanocytes are localized that stimulates or activates melanogenesis. UV-A radiation, on the contrary, can penetrate deeper through the dermo-epidermal junction. Nearly 20-35% of the impinging radiation will penetrate through the epidermis and reach the hairbulb region. It appears that the better stimulation of melanogenesis by UV-A than by UV-B is due to the selective activation and proliferation of melanocytes both at dermo-eipdermal junction and in the hairbulb. Many of the ultrastructural changes reflecting formation, melanization, transfer, and degradation of melanosomes that take place in skin following repeated treatments with either UV-B, UV-A, or UV-A plus 8-MOP (8-methoxypsoralen) are listed in Table 2. For details concerning the stimulation of pigmentation by UV-A plus 8-methoxypsoralen, a potent photosensitizing agent of skin, the reader is referred to the articles by Pathak et al. (1974) and Pathak and Fitzpatrick (1974).

Visible radiation (400-700 nm) and infrared radiation ( $\lambda > 750$  nm) are extremely weak in the induction or stimulation of melanogenesis. A single exposure in the range of 25-30 J cm<sup>-2</sup> of visible light will not stimulate melanogenesis. Repeated exposures of skin to either visible radiation or to infrared radiation may stimulate some melanogenesis but most of the stimulation is secondary to the effects of heat resulting from prolonged absorption of the radiant energy.

# 3.4. Effect of Single and Multiple Exposures of UV Radiation on Human Melanocytes

Photobiologic processes that lead to hyperpigmentation of skin following a single exposure to UV-B or UV-A are different from those that result from multiple exposures to UV-B or UV-A radiation. The increased melanin pigmentation after a single exposure to either UV-B or UV-A radiation primarily reflects changes in the functional activity of the melanocytes, whereas the hyperpigmentation induced by multiple exposures

to either UV-B or UV-A reflects changes not only in the functional activity of the melanocytes but also the numerical changes in the epidermal melanin units (i.e., in the melanocytes and the associated pool of keratinocytes). A single exposure to either UV-B or UV-A causes none or minimal change in the number of functional melanocytes, but reveals an increment in the synthesis, melanization, and a transfer of melanosomes (Pathak et al., 1965; Jimbow et al., 1974a,b, 1975b). Multiple exposures to either UV-A or UV-B cause a marked increase in (a) the number of melanocytes; (b) the number of melanosomes synthesized; (c) the degree of melanization of the melanosomes as a result of an increase in tyrosinase activity; (d) the number of melanosomes transferred to the keratinocytes; (e) a distinct alteration in the size of some of the melanosomes (some of the newly synthesized melanosomes are larger in size than those in the unexposed skin); and (f) alteration in the distribution pattern of melanosomes in keratinocytes as a result of a change in the size of some of the melanosomes.

#### 4. PHOTOPROTECTIVE ROLE OF MELANIN

In pigmented peoples, there exists a unique light absorbing and filtering system that minimizes the impact of photons on the vulnerable viable cells of the epidermis. The "white" population possesses a much less protective neutral density filter known as melanin, while the albino skin has virtually no neutral density filter, and more UV light penetrates such skin. In people with absence of melanin or in people who sunburn easily and tan poorly, skin will develop, early in life, abnormal changes caused by sunlight: wrinkling, keratoses, telangiectasia, and skin cancer (Fitzpatrick et al., 1974). The onset of the cancerous or other abnormal changes is directly related to the degree of sun exposure and the latitude at which the person resides (i.e., sun intensity times the duration of exposure), and is inversely related to the amount of melanin in the skin. Among races with dark skin, in which melanin pigment effectively filters UV radiation, there is very little skin cancer. This photoprotective role of melanin is attributable to its presence in the particulate and nonparticulate form in the epidermis. In the stratum corneum most of the melanin is usually in the nonparticulate, amorphous form, although in certain individuals who are heavily pigmented, one does find a few melanosomes scattered randomly in the nonviable, horny cells. Most of the particulate forms of melanosomes are believed to be degraded due to the presence of hydrolytic activity associated with the melanosome complexes or in the outer membrane of the discrete organelles. Melanin present in the melanosomes is nondegradable (Hori et al., 1968). The rest of the viable cells of the epidermis contain melanin-laden melanosomes in the particulate form.

The photoprotective role of melanin is accomplished by the following physical and chemical properties of the biochrome (Pathak and Fitzpatrick, 1974):

- a. Melanin absorbs UV and visible radiation and can act as a neutral density filter. Melanins isolated from human hair, melanoma, and other biologic materials show high absorption without any characteristic peaks or absorption bands in the UV, visible, and near-infrared region (200-2400 nm). This absorption increases in the shorter wavelengths in the UV spectrum and appears to be due to highly conjugated system in the polymer.
- b. Melanin-laden melanosomes attenuate the impinging radiation by scattering; this scattering involves any process that deflects electromagnetic radiation from a straight-line path and results in the attenuation of radiation. This increases the total absorbing path through which the UV radiation must pass. For particles with the dimensions of the order of wavelength of light in the UV spectrum (0.3  $\mu$ m), the impinging light may be scattered according to the Rayleigh relation (scattering is inversely proportional to the fourth power of the incident light). Maximum scattering occurs when the wavelength of light approaches the diameter of the particle. For particles larger in size than the wavelength of the incident light (e.g., melanosomes which are 0.3-1.0  $\mu$ m in size), the scattering relationship is quite complex, and more incident light will be scattered in the forward direction than in the backward direction.
- c. Melanin absorbs the radiant energy in the UV and visible spectra and dissipates the absorbed energy as heat. In this regard it is of interest to point out the hypothesis of McGinnes and Proctor (1973) that melanin in the cell may serve as a device by which it may convert the energy of the excited states into heat by a phenomenon known as photon-photon conversion. This hypothesis implies that melanin polymer can act as an amorphous semi-conductor in which coupling of phonons (i.e., vibrational modes of the melanin polymer) to its excited electronic states plays a role in the dissipation of energy absorbed from the impinging radiation.
- d. Melanin can also utilize the absorbed energy and undergo immediate oxidation through the generation of semiquinonoid free radicals (Pathak and Fitzpatrick, 1974).
- e. Melanin, as a stable free radical, with its ability for oxidation and reduction, can act as a biologic electron exchange polymer and minimize the impact of the impinging photons on the other vulnerable cell constituents (e.g., DNA) (Pathak and Fitzpatrick, 1974). The free radicals in melanin are quite stable and the unpaired electrons seem to be limited to localized regions of the polymer or are stabilized by a large number of resonance structures. Because of the unpaired electrons in melanin it may in effect serve as a one-dimensional semiconductor, where any bound protons

serve as electron traps. A free flow of charge in the form of electrons is then possible through the melanin (Longuet-Higgins, 1960; Pathak and Stratton, 1968; McGinnes et al., 1974). It is known that UV irradiation increases the spin concentration in biological tissues such as human skin. Trapping of free radicals which could disrupt the metabolism of living cells is thus feasible in presence of stable free radicals in melanin polymer.

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# The Interaction of UVA and UVB in the Production of Threshold Erythema

BARRY S. PAUL, M.D., AND JOHN A. PARRISH, M.D.

Department of Dermatology, Harvard Medical School, Massachusetts General Hospital, Boston, Massachusetts, U.S.A.

1 study was done to demonstrate quantitatively and aphically the way in which suberythemogenic doses of adband UVA and UVB interact in producing a visible thema. On the backs of fair-skinned human volunrs the minimal erythema dose (MED) was determined polychromatic UVA and UVB. Increasing fractions he UVA MED were given to sites already exposed to ious fractions of the UVB MED resulting in sites osed to various doses of both UVA and UVB. The 1e experiment was repeated with the order of waveds reversed. It was demonstrated that when UVA s followed by UVB an erythema was produced in se sites where the sum of the fractions was equal to an interaction termed photoaddition. When the A exposure followed the UVB, erythema was again dominantly noted in those sites demonstrating phoadition. However, in the latter case, numerous sites threshold erythema were noted where the sum of the ctions was greater than one. This is suggestive of torecovery. No evidence of photoaugmentation was erved with either order of exposure.

Itraviolet radiation of wavelengths 320-400 nm (UVA) regres at least 1,000 times more energy to produce delayed vtnema of human skin than does ultraviolet radiation of we relengths 290-320 nm (UVB) [1]. Yet, in many circumctances, UVA may make significant contributions to the production of erythema. The amount of solar UVA reaching the earth's surface may be several hundred times greater than the amount of UVB. Many sunscreens that effectively block or diminish the highly erythemogenic UVB do not block UVA thus permitting prolonged sun exposures and even higher UVA exposure doses. Late afternoon or early morning sun exposure, traditionally believed to be innocuous, contains a great amount of UVA, which may significantly contribute to sunburn incurred midday primarily by UVB. The quantitative manner in which UVA and UVB interact is important for other practical reasons such as developing safety standards for UV exposure, predicting the response to any radiation source based on consideration of the spectral power distribution and the human erythema action spectrum, and for calculating exposure doses in broadband UV

There are 3 possible ways by which suberythemogenic doses of UVA and UVB could interact to produce a threshold erythema: the sum of the fraction of the minimal erythema dose of UVA (MED<sub>A</sub>) and the fraction of the minimal erythema dose of UVB (MED<sub>B</sub>) can equal one, an interaction termed photoaddition; the sum can be less than one, an interaction called photoaugmentation; or the sum can be greater than one, an interaction called photoprotection or photorecovery. The literature on this subject has found proponents for all 3 of these

phenomena [2-9]. Because of the fundamental importance of this question to photobiology, we performed an experiment designed to carefully quantitate and graphically demonstrate which of the above interactions indeed occur.

#### MATERIALS AND METHODS

Subjects

Six healthy paid volunteer subjects participated in this study. All had Type I skin, one had widespread vitiligo and all testing was done on vitiligo patches. Informed consent was obtained from each subject.

#### **Ultraviolet Sources**

The UVA source was a 2,500 w xenon arc with a f/1.5 quartz condensing lens system. Radiation was filtered through 6 cm of an aqueous solution of a 7% CuSO<sub>4</sub> and 7% CoSO<sub>4</sub> in a quartz based chamber and through a Schott WG 335 (1 mm) filter. It was then projected onto the skin in a uniform (±10% circular field using a f/4 quartz lens and a UVA 45° dichroic mirror. Irradiance was 200 w/m². Spectral irradiance of this source is shown in Fig 1, as measured by an International Light IL 783 spectroradiometer. With this source the UVB irradiation was at least 5 orders of magnitude less than the UVA irradiation.

The UVB source was a  $1.2\times1.2$  m planar bank of closely spaced fluorescent sunlamp bulbs (FS40 Westinghouse). The output of this source was measured by a cosine corrected International Light UVB detector having a spectral responsivity weighted similarly to the action spectrum for delayed erythema. It had a biologically effective irradiance equivalent to  $5.5~\text{m/m}^2$  at 290 nm. Uniformity was  $\pm5\%$ . Full spectral irradiance of this source is given in Fig 2 as measured by an IL 783 spectroradiometer. Essentially all effective erythema producing irradiation from the source is UVB.

#### Determination of the MED Dose

The MED (minimal erythema dose) for UVA and UVB was determined for each subject. A series of eight 1 cm diameter circles ranging from 40 J/cm² to 100 J/cm² of UVA and 15 mj/cm² to 40 mj/cm² of UVB were exposed in 15% increments on the lower back. The sites were observed at 24 hr. The lowest exposure dose which resulted in a minimal perceptible erythema was defined as the threshold dose or MED for UVA (MED<sub>A</sub>) and UVB (MED<sub>B</sub>).

#### Waveband Interaction

An aluminum template of forty-nine 1 cm-diameter circles in a 7 × 7 display (7 rows by 7 columns) was affixed to the lower back. The first column received no UVA. The others received 1/6 MED<sub>A</sub>, 2/6 MED<sub>A</sub>, 3/6 MED<sub>A</sub>, 4/6 MED<sub>A</sub>, 5/6 MED<sub>A</sub> and 1 MED<sub>A</sub> respectively. UVB was then administered to the rows. The first row received no UVB, the others received 1/6 MED<sub>B</sub>, 2/6 MED<sub>B</sub>, 3/6 MED<sub>B</sub>, 4/6 MED<sub>B</sub>, 5/6 MED<sub>B</sub>, and 1 MED<sub>B</sub> respectively in a grid-like fashion superimposed on the UVA exposures. Hence, each exposure site received a different combination of fractions of MED<sub>A</sub> and MED<sub>B</sub> with the first column receiving only UVB and the first row receiving only UVA (see Fig 3). Twenty-four hours later each of the 49 exposure sites was read visually by at least two observers, recorded and photographed. The same process was then repeated on the opposite side of the lower back except the order was reversed with the UVB being given first followed by the UVA

# RESULTS

#### **MED**

The average MED<sub>B</sub> and MED<sub>A</sub> for the 6 subjects was 22 (range 17-26) mj/cm<sup>2</sup> and 66 (range 46-80) J/cm<sup>2</sup> respectively.

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Reprint requests to: John A. Parrish, M.D., Department of Dermatology, Massachusetts General Hospital, Boston, Massachusetts 02114.

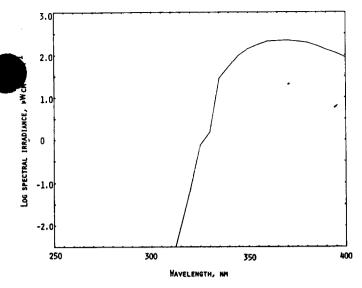


Fig 1. Spectral power distribution of UVA source (filtered xenon arc lamps).

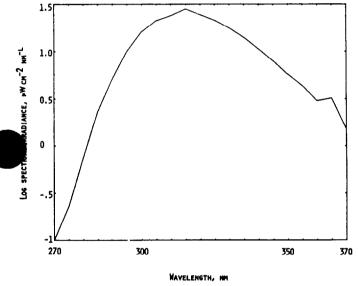


Fig 2. Spectral power distribution of UVB source (FS40).

# Waveband Interaction

The first subject developed considerable immediate pigment darkening from the UVA exposure which persisted at 24 hr making it difficult to determine the erythema threshold points. Thereafter, only the lightest skin type I subjects and a subject with widespread vitiligo were exposed to minimize this effect. These 5 subjects demonstrated erythema threshold points predominantly in a line along the diagnonal in the exposures in which UVB was preceded by UVA (see Fig 4A). When the order was reversed with UVA being given after UVB the threshold points again occurred predominantly in a line along the diagonal although there was at least one instance in all 5 subjects where the erythema threshold point was located in the line above the diagonal (see Fig 4B). The sign test has been used to test the hypothesis that the median of all erythema threshold points occur on the diagonal line. The result shows that the occurrence of erythema threshold points in the line bove the diagonal is not statistically significant (p = 0.055).

#### DISCUSSION

These results demonstrate that when suberythemogenic UVB is given after suberythemogenic UVA they interact by

photoaddition in producing a threshold erythema. When the order is reversed and UVB is given first, the interaction again is predominantly photoaddition although there is a suggestion of mild photorecovery. No evidence of photoaugmentation was noted with either sequence of radiation.

To maximize the quantitative accuracy and interpretability

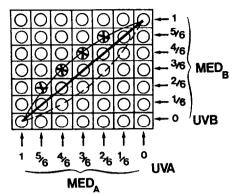


FIG 3. Experimental design. Each of the 49 exposure sites received a different combination of UVA and UVB. The points along the diagonal line from the lower left to the upper right are those which received sums of MED fractions equal to one (solid line). Threshold erythema occurring along this line is evidence for photoaddition. The points above or to the left of this line received a sum of greater than one and threshold erythema occurring in this area is evidence for photorecovery. One pattern of minimal photorecovery would be represented by (——). More striking photorecovery would place the threshold values further to the left upper portion of the design. The points below or to the right of the solid diagonal line received a combination totalling less than one, threshold erythema points in this region represent photoaugmentation. A pattern of minimal photoaugmentation is represented by (——).

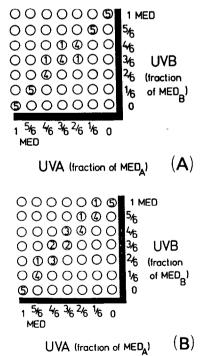


Fig 4. The encircled numbers represent how many of the 5 fair subjects demonstrated a minimal perceptible (threshold) erythema in that circle. All empty circles below these sites received less than threshold and demonstrated no erythema. Empty circles above received greater than threshold and showed erythema. Note that in Fig 4A, UVB following UVA exposure, the great predominance of threshold points are along the diagonal at the sites where the sum of the fractions are equal to one. In Fig 4B, UVA following UVB exposure, a number of threshold points occurred in the line above the diagonal.

his study, MED's for UVA and UVB were carefully deterded in all subjects in the area immediately adjacent to the perimental site. The experiment was carried out on the day dowing the MED determinations. While it is difficult to curately differentiate gradations of erythema visually, the ermination of the presence or absence of erythema is more difference in dose-response curve for UVA and UVB eryma, makes the interpretation of suprathreshold interactions more difficult. Therefore, a minimal perceptible erythema used as the endpoint or threshold erythema.

ne previous literature on this interaction is often difficult to pret. van der Leun and Stoop [2] noted that 5 hr of indirect ght filtered through windowglass increased by 20 to 30% mount of previously given 250 nm and 300 nm radiation ed to produce an MED. This demonstrates photorecovery recause they did not quantitate the UVA given in the five exposure or calculate what percent this was of the MEDA, egree of photorecovery is unknown. When they reversed rder of exposures, giving the sunlight first, they report a ase in the MED<sub>250</sub> and MED<sub>300</sub>. Similarly, it is not clear cer this was a photoadditive or photoaugmentative effect. Weelden [3] also demonstrated photorecovery when UVA given following either UVB or UVC. Reversing the order ed photoaddition when UVC followed UVA exposure, and photoaugmentation when UVB followed UVA. The phomentation noted was not statistically significant. Willis, man, and Epstein [4] claimed to observe photoaugmenta-After their subjects were given a fixed dose of UVA, only or 50% of the MED<sub>B</sub> was needed to produce an erythema. in this data is difficult to interpret because they did not stitute the MED<sub>A</sub> in each subject. It is noteworthy that the subjects whose MEDB was reduced the most had the lowest ai MED<sub>B</sub> and therefore probably the lowest MED<sub>A</sub>. Since UVA exposures were fixed, one can infer that these subjects raved a higher percentage of their MEDA. If it were as high 5/4 of the MEDA then the results could be explained by atoaddition. Reversing the UV exposure order was not done

in a follow-up study Kaidbey and Kligman [5] combined Actions of the determined MED<sub>B</sub> to 10, 15 and 20 min of UVA. aithough they did mention that their source causes redness in the average subject after 60 min of exposure, they did not calculate the MEDA for each subject and so it is not known what fraction of the MEDA was given. A study by Spiegel et al [6] noted that 14 of 17 subjects demonstrated an erythema at 24 hr when 7.5 J/cm² of UVA was given before or after one-half of the MED or UVB. Again the MED for UVA was not determined. A similar problem arises in a recent study of Boer, Schothorst, and Suurmond [7]. They noted that the MED<sub>B</sub> was reduced by 20% when combined with a prior irradiation of 10 J/cm<sup>2</sup> of UVA. They termed this photoaugmentation. However, if the MEDA with their source was approximately 50 J/cm<sup>2</sup> their results would then be best described as photoaddition. They did not reverse the order of exposure. Ying, Parrish, and Pathak [8] found photoaddition to be the case for UVA and UVB regardless of the order given. However, when UVB was given prior to UVA, only one dose of UVA was used, combined with fractions of the MED<sub>B</sub>. With such limited exposure combinations it is doubtful that the mild photorecovery effect observed in our study would have been discernible to them. Sayre, Olson, and Everett [9] using a monochrometer showed that combined exposures to wavelengths 254 nm, 280 nm, and 297 nm caused photoaddition for delayed erythema. Using 14 different combinations of these wavelengths, the average of the rum of the fractions needed to produce a minimal erythema

In the presented work, we are measuring the interaction of suberythemal doses of UV. It is an important concept that even at these suberythemal doses there are biological changes in the skin. Studies have shown that the suberythemal doses of UVB

[10] and UVA [4] cause DNA damage, inducing an increase of H<sup>3</sup>-Thymidine sparsely labeled cells, which signifies DNA repair. In both cases this DNA damage occurred at doses too small to cause histologic changes or erythema. Suberythemal doses of UVB can cause sunburn cell production [11]. Suberythemal doses of UVA can cause delayed melanogenesis in contrast to UVB which requires erythemal doses to produce melanogenesis [12]. Finally suberythemal doses of both UVB and UVA given at 24 hr intervals appear to have a cumulative effect resulting in the lowering of the erythema threshold [12]. The photoadditive and mildly photoprotective interactions herein described are only certain for the production of threshold erythema. It has been suggested that UVA does not enhance UVB-induced sunburn cell production [11]. Interactions between UVA and UVB in causing DNA damage or melanogenesis have not yet been well quantified for human skin.

When studying the interaction of UVA and UVB in the production of erythema, one must remember that the skin's biological response to UVA and UVB are different. UVB erythema can be induced with about 20-50 mj/cm<sup>2</sup>, peaks at 12-20 hr, has a modest dose-response curve, and is superficial, pinkred and easily blanched. UVA erythema requires more than 1,000 times more energy, i.e. about 50-100 J/cm<sup>2</sup>, may peak sooner, has a steeper dose response curve, and is deep-red to violaceous requiring firm pressure to blanch out. One possible reason for these differences is that the erythemas are being produced by different mechanisms. UVA and UVB may be absorbed by different chromophores setting off a different chain of events leading to erythema. Because of less epidermal absorption and less dermal scattering, UVA penetrates much more deeply into the dermis than UVB [13]. Erythemogenic doses of UVA cause primarily vessel damage and a dermal infiltrate; equally erythemogenic doses of UVB cause mainly epidermal changes such as dyskeratotic sunburn cells [14]. The mediators may also be different as evidenced by the fact that indomethacin will cause temporary blanching of a UVB-induced erythema but not a UVA induced erythema [15]. This implies that prostaglandine may mediate part of the UVB erythema but not the UVA erythema. UVA as well as visible light may also produce immediate pigment darkening (IPD). This is believed to be due to the photooxidation of preformed melanin and in general is greater in subjects with more faculative or constitutive pigment [1]. The IPD that we noted was often quite marked and persistent, eventually blending into the delayed tanning. We noted no evidence that IPD is photoprotective.

No immediate erythema was noted with UVA or UVB. This differs from a previous study [16] which noted significant immediate erythema from UVA which persisted and blended into delayed erythema with no diphasic response. This difference may be related to the fact that the UVA irradiance in the above study was considerably higher than ours.

The suggestion of photorecovery which occurs when UVA exposure follows UVB is very interesting. It should be emphasized that this means that the UVB erythema may be increased by subsequent UVA exposure, but not as much as would be predicted by their addition. There is now evidence which suggests that human epidermal cells contain photoreactivating enzyme [17]. This enzyme in the presence of UVA or visible light repairs thymine dimers which can be caused by prior UVB exposure. The relationship, if any, of UV-induced DNA damage and repair to erythema production is not known. However, it is possible that UVA, by hastening DNA repair, lessens the erythema response.

Although the mechanism and mediators of UVA and UVB erythema production and their interaction are still largely unknown, we have shown clinically that they interact predominantly via photoaddition to produce a threshold erythema. Photorecovery is suggested in the case when UVA follows UVB exposure and further studies are in progress to confirm this. There was no evidence of photoaugmentation.

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# Announcement

The Fifth Annual Westwood Carolina Conference on Clinical Dermatology will take place October 14-17, 1982, at the Hyatt at Palmetto Dunes, Hilton Head Island, South Carolina. For information and registration, contact Dermatology Educational Services, Post Office Box 4207, Kenmore, New York 14217, (716)884-1758.